OR

OR

OR

OR

TOTAL

ADD'L FEE

	Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of informa PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875											Application or Docket Number 04834078				
-	CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY		OR	OTHER THAN SMALL ENTITY			
		FOR		NUMBER FILED		"	NUMB	ER EXTRA		RATE	FEE		R	ATE	-	
		IC FEE CFR 1.16(a))							1		\$		``		FEE	
C.	TOT	AL CLAIMS CFR 1.16(c))		minus 20			= .		1	V. 6		OR			\$	
أسيراه	ND	EPENDENT CLAI	MS						-	X \$=		OR	× 5_		ļ	
	(37 (CFR 1.16(b))	minus 3 = •			 		4	× \$=		OR	× \$	<u> </u>			
- A	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))] [+ \$=	<u> </u>	OR	+ \$	====		
	* If the difference in column 1 is less than zero, enter "0" in column 2.									TOTAL		OR	то	TAL		
		,		S AM	ENDED	- PΔF	י וו דר					-				
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								- , ,	SMALL ENTITY		OR	OTHER TH SMALL EN			
	AMENDMENT A		AS IING IR MENT		NUM PREV	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RA	ιτE	ADD TION/ FEE		
	ڲٙٳ	Total (37 CFR 1.16(c))	. 3	/	Minus	" 2	2/	=	7 [× \$_ =		OR	× \$	=		
		Independent (37 CFR 1.16(b))	•	8 Minus		8		=	1	x \$ =		OR	x \$	=		
	₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+ \$ =		OR				
-	!				•		jį	TOTAL ADD'L FEE		OR	+ \$_ TOTAI ADD'L					
			(Column	1)		(Co										
	8 2		REMAIN AFTE	CLAIMS MAINING AFTER ENDMENT		NUN PREVI	IGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE		ADDI TIONA FEE	
Š	١	Total (37 CFR 1.16(c))	•		Minus	••		=		X \$ = .		OR	:··· X S	=		
ĺ		Independent (37 CFR 1.16(b))	•		Minus	•••		=	1	x \$ =		OR	x \$	=		
4	AFTER								1							
-	THOSE PRESENTATION OF MOETH LE DEPENDENT CLAIM (37 CFR 1.16(0))									+ \$ = TOTAL	,	OR	+ \$ TOTAL	=		
						÷ <u> </u>				ADD'L FEE		OR	ADD'L			
_		(Column 1) (Column 2) (Column 3)														
(E		RE		ING R			HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RA	TE	ADDI TIONA	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))

Minus

Total (37 CFR 1.16(c))

Independent (37 CFR 1.16(b))

X \$

TOTAL

ADD'L FEE

<sup>If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.</sup>